								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOF Effective January 1, 2003								· 10/6/2-15 12					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E		OR	OTHER SMALL		
TOTAL CLAIMS			14 .					RATE	FEE].	RATE	FEE	
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC FE	375.00	ÓR	Basic Fee	750.00	
TOTAL CHARGEABLE CLAIMS			14 minus 20=		. d			X\$ 9=		OR	X\$18¤		
INDEPENDENT CLAIMS			3 mi	nus:3 =	d			X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT		. 0			+140=	,	OR	÷280∓		
• If	the difference	in column 1 is	rọ, enter	"0" in c	olumn 2		TOTAL	220	OR				
CLAIMS AS AMENDED - PART II									المحجا	10	• • •		
4	12416	(Column 1)	(Column 2) (Column 3				ĵ•	SMALL	ENTITY	OR	OTHER SMALL I		
ď		CLAIMS	1	· HIGH			T I		ADDI-	Ì	-	ADDI-	
AMENDMENT /		REMAINING AFTER AMENDMENT		, NUMI PREVIO PAID	JUSLY	PRESENT - EXTRA		PATE	TIONAL		RATE	TIONAL FEE	
	Total	•//	Minus	-2	0	- /		X\$,9=		OR	X\$18=		
	Independent	.3	Minus	APA (3	1		X42= .		OR	X84=		
Ľ	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	ENDENT	CLAIM		ן נ	•	-	.			
	17	g			•			.+140=		OR	+280=		
	1 . '	•		•		·		YOTAL ADDIT, FEE		ÖR	YOTAL ADDIT, FEE		
[2-26-06 (Column 1) (Column 2) (Column 3)											• .	<i>:</i>	
AMENDMENT B		CLAIMS REMAINING AFTER		HIGH	HEST MBER /ROUSLY D FOR	PRESENT EXTRA	A		ADDI- TIONAL FEE			ADDI-	
				PREVE				RATE		•	RATE	TIONAL	
	Total	* O	Minus	At 2			1	X\$ 9=	FEE	:	X\$18=	FEE	
	Independent	• 3	Minus .	·	3	-	1		\bigvee	OR			
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM		1	X42=	Λ·	OR	X84=		
				· "	٠,		•	+140=		OR	+280=		
			•	•				TOTAL		OR	TOTAL ADDIT. FEE	•	
(Column 1) (Column 2) (Column 3)									. :	•	. :		
<u></u>		CLAIMS	-4-01-A	. HRGH	EST :		Ï,	: ','	KODI -			ADD:	
AMENDMENT C		REMAINING AFTER		PREVIO		PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AMENDMENT		PAID] [FEE			FEE	
	Total	•	Minus	**	•	-] [X\$.9=		OR	X\$18=		
	Independent	•	Minus	464		e e]	X42=	·		X84=		
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		1			OR	'``		
		+140=		OR	+280=	•							
-	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. — If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE												
	n the "Highest Nu The "Highest Num	mber Previously Prober Previously Pal	uid For (N THI d For (Total or	S SPACE I	s less the ent) is the	in 3, enter "3." highest riumb	•		-	x țu có			

MAIN OFFICE, U.S. DEPARTMENT OF COMMERCE